

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Attachment 7.2-A

State Mississippi

NONDISCRIMINATION

Currently approved methods of administration under the Civil Rights requirements are on file in the Regional Office for Civil Rights.

22-16
4/1 9/8/73

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Mississippi

Page 1

METHODS OF ADMINISTRATION REGARDING COMPLIANCE WITH TITLE VI OF
THE CIVIL RIGHTS ACT OF 1964

I. Assignment of Responsibility -- Responsible for overall
coordination of Title VI activities.

Medicaid Program Administrator (0019) - Assigned the specific duties of implementing policies and procedures approved by the Department of Health & Human Services, Office for Civil Rights (OCR), for monitoring all providers of Title XIX services to insure their compliance with Federal nondiscriminatory regulations. The Medicaid Program Administrator will delegate responsibilities to a Medicaid Program Development Specialist to perform tasks pertinent to the administration of this program.

For services based on the Title XVIII certification, this Agency accepts all Title VI certifications made by the Office for Civil Rights. After initial certification by OCR, compliance determinations for both the single State agency and Region IV OCR will be completed in keeping with approved procedures.

II. Dissemination of Information

Orientation sessions are conducted periodically for all new agency employees. These sessions are designed to acquaint the employee with all general areas of the Medicaid Program, including Title VI requirements. Those with more specific responsibilities in the area of Title VI are given more detailed instructions. Joint training has been done with staff of the Regional Office for Civil Rights.

All brochures, leaflets and other informational material for dissemination to the public contain appropriate statements relating to provisions of Title VI and instructions as to how and where complaints may be filed.

Vendors are advised of Title VI requirements through individual provider manuals, participation agreements, statements on claim forms, personal contact by agency staff in the routine performance of duty, and, in the case of nursing homes, through special regional meetings arranged through the nursing home professional associations.

Transmittal	<u>89-04</u>	Date Received	<u>5/3/90</u>	Date Effective	<u>4/1/90</u>
Supersedes TM	<u>89-35</u>	Date Approved	<u>5/8/90</u>		
	<u>84-35</u>				

State Mississippi

Page 2

METHODS OF ADMINISTRATION REGARDING COMPLIANCE WITH TITLE VI OF
THE CIVIL RIGHTS ACT OF 1964

III. Maintaining and Assuring Compliance

Region IV OCR has approved the attached written procedures as acceptable for monitoring the compliance of Title XIX providers. These procedures were developed for their appropriateness to implementation in this specific State Agency and were developed with the guidance and assistance of Region IV OCR staff. Written procedures for handling complaints of discriminatory nature are also included in the approved procedures (see attached Exhibit "A").

The attached written procedures are currently being utilized by the appropriate Mississippi Medicaid staff in the on-going monitoring of State Title XIX providers.

IV. Recruitment and Training Programs

The policies, rules, and procedures governing personnel and position management with this agency are under the authority of the Mississippi Code of 1972, as Amended, Section 25-9-101, et seq., as approved by the Mississippi State Personnel Board, effective February 1, 1981.

All vacancies are filled through approved State Personnel Board procedures and this agency has a standing request that State Personnel Board advertisements of vacancies be made in such a way as to reach all segments of the community. Applicants certified by the State Personnel Board are considered on the basis of education, experience and personal interview with the single objective of filling vacancies with the best qualified persons. Race, sex and age are not determining factors, nor is a physical handicap if it does not impair the person's ability to do the work required. The make-up of our staff attests to the effectiveness of the policies as stated.

In-service training is provided all employees on an on-going basis through supervisory personnel and additional training outside the agency is made available to all employees with the only condition being relevance to the employees' duties with the agency.

Transmittal #82-16

82-16
9/24/82 eff 7/1/82

File 2 504 PA

Attachment 7.2-A
Exhibit "A"
Page 1

CIVIL RIGHTS AND SECTION 504 REVIEW PROCEDURE

Transmittal #87-19

ADD. 1/14/88

CIVIL RIGHTS AND SECTION 504 REVIEW PROCEDURE

I.	Purpose	1
II.	Intent	2
III.	Hospital Compliance Reviews	3
	A. General Procedure Description	3
	B. Specific Procedures	4
IV.	Long Term Care Facilities Compliance Reviews	7
	A. General Procedure Description	7
	B. Specific Procedures	7
V.	Physician Compliance Reviews	10
	A. General Procedure Description	10
	B. Specific Procedure Description	11
VI.	Complaint Procedure	13
VII.	Federal Regulation	15

PURPOSE

The purpose of this procedure manual is to provide a step-by-step guideline for Division of Medicaid personnel to monitor the Civil Rights and Section 504 compliance of the Program's providers of service. These procedures will help to implement an effective mechanism to reasonably insure that providers/vendors comply with the non-discriminatory requirements and guidelines of the Civil Rights Act and the Rehabilitation Act.

INTENT

The intent of this plan is to insure that no person of the State of Mississippi shall, on the grounds of race, color, national origin, handicap, sex, or religion, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under, any Title XIX program.

In order to accomplish the intent, providers/vendors of the Title XIX program will receive periodic reviews by appropriate Division of Medicaid staff. Specific compliance information (as outlined in the following procedures) will be requested of the providers/vendors and records of these reviews - containing compliance information - will be kept at the State Medicaid Office. This information will be available to the Regional Civil Rights Office upon their request.

Any person who believes him/herself to be subjected to discrimination prohibited by the Civil Rights Act or the Rehabilitation Act may file a complaint with the Division of Medicaid's staff and prompt investigation of the alleged discrimination (outlined in the following procedures) will be undertaken by the designated representative of the Division.

HOSPITAL COMPLIANCE REVIEWS

A. General Procedure Description

Once every two (2) years each hospital provider of Medicaid services will receive an office compliance review. Each hospital will be requested to submit to this office certain information necessary to determine provider compliance. This information shall minimally include: 1. a current weekly hospital census to include weekly admissions and discharge, 2. copies of all hospital current written Title VI policies, 3. current employment statistics, including minority physicians practicing on hospital staff and overall percentage of minority professional staff, and 4. appropriate 504 information.

All information submitted will receive a desk review by appropriate Division of Medicaid personnel. Certain practices and submitted information could require an explanation from the provider facility because discrimination may be involved. These specific indications will be "spelled out" in writing to each provider and an explanation will be requested of that same provider. (These desk review findings will also include actions deemed necessary by Division of Medicaid personnel to correct possible discrimination.) If the hospital's written explanation does not appear sufficient, or if significant problems exist, Division of Medicaid personnel may find it necessary to conduct on-site review in the provider's facility. This on-site review will consist primarily of the same information requested in the desk review with, additionally, administrative and employee interviews.

Subsequent follow-up reviews, either desk or on-site, will be conducted with each provider facility where problems exist. These reviews will be initiated within 3-6 months from the review where significant problems were noted. These follow-up reviews should insure facility commitment toward planned change.

B. Specific Procedures

1. Each month requests for information will be sent to individual hospital providers. (Tickler file will show which provider should be sent information requests during which month.) This request will include a cover letter and blank census data forms.

2. This compliance information should be returned to the Division of Medicaid office in a timely and complete manner. Information should be returned within a 30-day time frame. Authorization for such compliance information and this office's access to that same information are clearly outlined in Part 80.6 of the Civil Rights Act.

3. Upon receipt of this information, Mississippi Division of Medicaid's 504 and Title VI personnel will review its content to determine if the hospital provider practices any procedures which might suggest the presence of discrimination.

4. The requested census data should show the designated Review person whether any of the following discriminatory practices are existent at the hospital. The following are definite problem areas that need to be addressed to the provider hospitals if they are apparent in census information:

a. Placing together patients of one race whose age, sex, diagnosis, or condition would ordinarily cause them to be placed apart.

b. Repeated use of the same rooms, wards, corridors, wings, floors, or buildings for minority group patients with corresponding absence of non-minority patients for such areas.

c. Repeated use of the same rooms in undesirable locations such as next to stairways and service areas by minority group patients with corresponding absence of non-minority patients from such areas.

d. Exclusive or virtually exclusive occupancy of private rooms by any particular racial group in a facility which has both private and multibed accommodations.

- e. A large number of room transfers.
- f. The under or over use of the facility by any one racial group in the service area or potential service area. "Tokenism" is placing a limitation on the number of minority group members that will be admitted to the facility or to its staff, either as a matter of policy or practice.

5. Written policy statements should be compared with Office of Civil Rights' guidelines to insure compatibility. Once copies of written policy statements have been secured and placed in Mississippi Division of Medicaid files, future requests for written policies will only be necessary if there has been a change in provider written Title VI policy.

Specific written hospital policies should address: a. room assignments, b. admissions, c. patient records, d. staff privileges, e. patient services, f. referrals, g. notification of services available.

6. Employment statistics will be reviewed to insure that minority physicians practicing in the service area serve on the hospital's medical staff with staff privileges. Percentage of minority professional staff will also be reviewed to determine what percentage of the professional staff is minority persons.

7. 504 information will be reviewed in an effort to determine if:

- a. The hospital has completed the required self-evaluation.
- b. The hospital has met notification requirements.
- c. The hospital has adopted an appropriate grievance procedure.
- d. The hospital's programs, are, in part, accessible to handicapped individuals.

8. Once all the material has been reviewed, the hospital provider should be notified in writing of the findings of the review. The responsible Mississippi Division